



Patient Participation Group - Meeting Minutes

Meeting date: Monday 30th April 2018

Meeting time: 6:15pm – 8:30pm

Attendees:	Apologies:
(CB)	(MC)
(SJB)	(MG)
(JG)	(BH)
(JM)	(SJ)
(MW)	(ML)
(AW)	(PhT)
Caroline Smith (Gloucestershire Clinical Commissioning Group – Engagement and Inclusion)	(PT)
Dr Andrew Coombes (GP Partner - AC)	(JW)
Sally Charlton (Practice Manager - SHMC)	
Nikki Jones (Organisational Manager - NJ)	

Welcome

SHMC welcomed everyone to the meeting and introduced new group member Janet McCutcheon.

Team changes

NJ confirmed that dispenser Sharon Collett had finished employment at the practice having accepted a new role at Drybrook Surgery. A new dispenser Christine Lewis has joined the team, with many years of previous dispensing experience within general practice.

NJ also confirmed that Health Care Assistant Ann Willcock would be retiring. The practices busy recruitment period continues.

New health centre

SHMC confirmed that a patient engagement consultation meeting was in the process of being planned for June. It was agreed that due to the importance of this meeting it would take the place of the July group meeting. The consultation meeting date would be confirmed within an invitation as soon as possible and that Monday 4th June was being considered as a possible date.

Improved Access Pilot

AC discussed progress to date with the Improved Access pilot. AC explained this was a funded scheme to try and extend appointments until 8pm and to offer Saturday morning appointments.

The scheme is being offered within the Forest locality with practices working together as a collaborative. Every practice is involved other than Newnham. Not all doctors are involved with the pilot.

The collaborative approach encourages practices to pull together and co-operate with each other, this is helping practices to feel less isolated.

Improved access appointments are additional appointments to those already supplied by practices and GPs.

It is hoped the pilot will continue and be rolled out throughout the whole of Gloucestershire.

Plans are in hand for Practice Nurse and HCA appointments to also become available through the pilot.

FHC's reception team are very grateful to have these additional appointments to offer patients; once bookings are full, they need to direct patients to call the NHS 111 service for triage. Tony Morgan (Specialist Practitioner) is a paramedic, nurse and prescriber. He works for the practice 3 days per week and undertakes other work around this. Tony provides same-day appointments for urgent care needs and assists with home visits for patients too ill or frail to attend surgery.

The practice historically ran Saturday morning appointments until 2002, when this was stopped due to under-utilisation by patients.

Productive General Practice programme

SHMC confirmed the practice had been granted funding for a productive general practice training programme. Places have been secured for 5 people to attend. The programme runs from May-July and involves a mix of off-site and on-site training sessions. It will require protected time to review some processes with a view to stream-lining and increasing our efficiency and productivity.

Caroline Smith (CCG) – Engagement and inclusion

Caroline advised the group that she is Gloucestershire Clinical Commissioning Group's lead for patient engagement and inclusion. Caroline's job role involves meeting with patients and gathering feedback on a broader scale.

Feedback received indicates that clinical aspects of care are very positive and get pretty good outcomes.

Caroline explained there are 3 levels of patient engagement:

- Individual - where patients are engaged in their own care
- Understanding – involves engagement with improvement plans
- Organisational – an example of this is plans for a new community hospital

County PPG network meetings are facilitated quarterly and have an interesting agenda.

The engagement and inclusion team works with community groups, voluntary organisations and parish councils etc.

Caroline expressed interest and willingness to attend the June health centre premises consultation meeting.

Caroline confirmed that an information bus / mobile unit is available for practices and patient groups to use. Other practices have found this useful when hosting a particular information event for example around Diabetes.

Caroline provided the group with an update regarding the community hospital project. Plans are that a single new hospital once fully operational will replace the Dilke and Lydney. This was a decision taken by Gloucestershire Clinical Commissioning Group and Gloucestershire Care Services following the public consultation period September – December 2017.

Caroline confirmed that both the current hospitals are extremely old with the Dilke approximately 95 years and Lydney over 100.

There are recognised practicalities and issues:

- Lydney site is spread across a road
- Consulting rooms at the Dilke are very small
- Wheelchair bound patients have difficulty accessing rooms
- There are not enough side rooms for patients suffering infections or reaching end of life to meet demand
- Staff need to transfer between both sites to run clinics – this is not ideal

It is time to think of the longer-term and do something differently. Gloucestershire Care Services have earmarked some funds to build a new hospital. Plans are for this to be in or near one of the main three towns in the southern part of the Forest; Coleford, Cinderford or Lydney, due to public transport links.

A citizen's jury will be established ensuring local people have involvement in the decision as to where the new build should be. Evidence will be presented on the following:

- Local population
- Travel and transport
- Community hospital users
- Ten years' time

This will be well facilitated, predominantly held in public in the Forest with invitation to apply by application form. Criteria will be followed when considering applications for the citizens jury to ensure a cross section of people based on gender, age, home address etc are recruited. Town councils and leagues of friends for both hospitals will have involvement.

The jury recommendation will form one part of the final decision. More public engagement takes place throughout May until mid-June.

There is full commitment to providing all current services with scope for more, for example endoscopy.

The opening date aim is 2021/2022. The new site will need flexibility to expand, adapt and change.

There are currently no plans for a maternity unit as there are not enough births in the Forest to run a safe, sustainable service.

There are also no plans for hernia operations to be performed at the new hospital due to the risk of bowel perforations.

The hospitals were given to the NHS in 1948, ultimately existing sites will be sold off and the decision regarding use of money generated will rest with NHS England.

Practice survey feedback

NJ confirmed a recent practice survey had been undertaken, with a main focus on organisation.

The survey form utilised was reviewed by the group and updates to it agreed during the January 2018 group meeting.

At the previous meeting agreement had also been reached for this practice survey to incorporate the 2 main “friends and family” test survey questions, to avoid having 2 surveys running at the same time, working against each other.

NJ confirmed feedback received had been excellent and summarised the key statistics below:

- **91%** found ability to contact by telephone very good or good
- **97%** felt service from receptionists was very good or good – our highest achievement in this area to-date
- **96%** felt care provided by Nurses and HCA’s was very good or good
- **79%** found late evening or early morning extended access appointments beneficial
- **73%** indicated they were able to consult same day here, through an improved access appointment or a chemist pharmacist
- **58%** were satisfied with routine book-ahead waiting time frames to see their usual or preferred doctor – this was higher than anticipated as appointment demand and access has proven problematic for many years
- **93%** were extremely likely or likely to recommend our practice to friends and family if they needed similar care

Patients had taken the time to write many, positive, complimentary comments on the survey forms.

There were some negative comments concerning receptionists, however the group recognised our reception team have a very difficult job to do and felt the excellent **97%** percentage achievement should be recognised.

Plans are in hand for a customer service training update to be scheduled for 2019. It was recognised that new receptionists have been recruited since the last training update in this area.

Many comments requested improved appointment access. The practice has regularly reviewed the appointment system and will continue to do so with the aim of improving this for patients. NJ confirmed that the survey had identified some issues with frequent attendance from patients who do not have an ongoing illness or condition. It was agreed that this would be looked into further.

Next meeting(s)

- Health centre project consultation – June date to be confirmed
- Usual Ruardean group meeting – October date to be confirmed

Other discussion:

It was clarified that we cannot offer on-line appointment booking with practice nurses, as different duties require different time frames and not all nurses are trained to cover all duties.

Monday morning practice visits for new group members can be planned for the Autumn. AW and JM both expressed interest in this.